



Atty. Dkt. No. 066683-0190

1632#
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Applicant: Tomoki TODO

Title: USE OF SOLUBLE COSTIMULATORY FACTOR FOR
TUMOR IMMUNO-GENE THERAPY

Appl. No.: 09/679,147

Filing Date: 10/05/2000

Examiner: Anne Beckerleg

Art Unit: 1632

AMENDMENT TRANSMITTAL

Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a Small Entity statement previously submitted.
- ☐ Small Entity statement is enclosed.
- ☒ The fee required for additional claims is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
Total Claims:	47	32	15	x \$18.00	\$270.00
Independents:	4	4	0	x \$84.00	\$0.00
First presentation of any Multiple Dependent Claims:				+ \$280.00	\$0.00
CLAIMS FEE TOTAL:					\$270.00

- ☒ Applicants hereby petition for an extension of time under 37 C.F.R. § 1.136(a) for the total number of months checked below:

<input checked="" type="checkbox"/>	Extension for response filed within the first month:	\$110.00	\$110.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$400.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$920.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,440.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$1,960.00	\$0.00
EXTENSION FEE TOTAL:			\$110.00
CLAIMS AND EXTENSION FEE TOTAL:			\$380.00
<input checked="" type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):		\$190.00
TOTAL FEE:			\$190.00


- ☐ Please charge Deposit Account No. 19-0741 in the amount of \$190.00. A duplicate copy of this transmittal is enclosed.
- ☒ A check in the amount of \$190.00 is enclosed.
- ☒ Clean copies of pages 10 and 11 of the application are enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

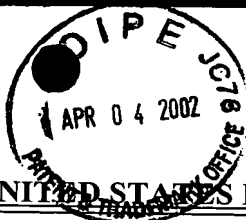
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date April 4, 2002

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No. 066683-0190

In re patent application of

Tomoki TODO *et al.*

Serial No. 09/679,147

Filed: October 5, 2000

Group Art Unit: 1632

Examiner: Anne Beckerleg

For: ***USE OF SOLUBLE COSTIMULATORY FACTOR
FOR TUMOR IMMUNO-GENE THERAPY***

**AMENDMENT AND REQUEST FOR
RECONSIDERATION UNDER 37 CFR § 1.111**

Commissioner for Patents
Washington, D.C. 20231

Sir:

This is a response to the Official Action mailed December 19, 2001, in connection with the captioned application. Please amend the application as follows.

IN THE CLAIMS

Please add new claims 33-47.

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